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For subscription requests and enquiries, contact Colonel Stephen Curry, Defence Health Service, CP2-7-002, Campbell Park Offices, CANBERRA ACT 2600. Fax: (02) 6266 3941 Email: stephen.curry2@defence.gov.au

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Infectious disease: still a major enemy

IT IS WITH GREAT REGRET that we note the retirement of Professor Karl Rieckmann AM as Director of the Army Malarial Institute (AMI) at Enoggera, Queensland. He has had a major academic influence in that discipline and the Australian Defence Force is indebted to him. Karl will continue as a part-time consultant at the AMI. The new Director of the AMI is Professor Dennis Shanks. The AMI is a world-recognised centre for malaria research and training, affiliated with the University of Queensland. It has been a Collaborating Centre for Malaria of the World Health Organization for many years. Its primary role is to protect ADF personnel from malaria and other vector-borne diseases.

Infectious disease is a major theme of this edition, with articles on scrub typhus (*page 10*), chlamydia (*pages 14 and 20*), hepatitis C (*page 22*) and our regular update on malaria in the ADF (*page 19*). Defence Health Service members hardly need reminding of the crippling effect that diseases, especially those of an infectious nature, have on the conduct of military operations. In the Peloponnesian War of 430 BC an unknown infection killed a quarter of the Athenian troops, and in 1489 Spanish Christian troops lost 3000 men in battle in Granada and 20000 to typhus. Before World War II, more soldiers died of infectious diseases than combat wounds.

Our own Howard Florey illustrates the potential for health professionals to affect the outcome of conflicts. Just over 60 years ago, the Australian doctor tested the effects of penicillin on wounded soldiers in North Africa. Penicillin revolutionised the treatment of infected battle wounds and prevented amputation of limbs and death in many cases. The drug was available to treat Allied troops by the end of World War II. It has since revolutionised medical science.

We follow a recent article on ethics and military research with an examination of the "medical research" conducted by the Nazis (*page 33*). Korda makes the point that, even when good results were accidentally discovered, they were not recognised or developed — the Nazis missed the opportunity to develop an effective typhus vaccine.

The current medical support by ADF members in Iraq is graphically described by Rosenfeld et al (*page 2*). Their article emphasises the importance of our presence in that theatre of operations. The deployment provides our medical and nursing officers with invaluable trauma care experience. Mayo and Kluger from Israel provide insight into the destructive force of terrorist bombings (*page 40*).

We also continue our regular features of Warrant Officer reports (*page 38*) and Clinical Tips (*page 8*).

Commander Mike O'Connor MD, FRANZCOG, RANR

Editor, *ADF Health*

